IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF Columbia

Lucas Ward) Civil Action No
[Enter the full name of the plaintiff in this action]) (to be assigned by Clerk
Sheriff Al Cannon;	COMPLAINT State Prisoner
Officer J. Phillips y and))
Officer D. Homen;	· '
Enter above the full name of defendant(s) in this action	 Case: 1:16-cv-02122 Assigned To: Unassigned Assign. Date: 10/25/2016 Description: Pro Se Gen. Civil (F Deck)
I. PREVIOUS LAWSUITS	
A. Have you begun other lawsuits in state or federal court dea otherwise related to your imprisonment?	aling with the same facts involved in this action or Yes No
 B. If your answer to A is Yes, describe the lawsuit in the sp additional lawsuits on another piece of paper using the san 1. Parties to this previous lawsuit: Plaintiff:	
Defendant(s): N/A	
2. Court: <i>N/A</i>	
(If federal court, name the district; if s	state court, name the county)
3. Docket Number: N/A	
4. Name(s) of Judge(s) to whom case was assigned:	NA
5. Disposition: (For example, was the case dismissed	d? Appealed? Pending?)
6. Approximate date of filing lawsuit:	'A
7. Approximate date of disposition:	/A
	<u>.</u>
	RECEEVED Mail Room

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II.	PI	LACE OF PRESENT CONFINEMENT
	Α.	Name of Prison/Jail/Institution: Charleston County Defention Center
	В.	What are the issues that you are attempting to litigate in the above-captioned case? <u>Infrincement</u>
		OF U.S.C AMENCI.VIII Cruel and VAUSUCI QUAIShment Failure to Grotect
	C.	(1) Is there a prisoner grievance procedure in this institution? Yes No
		(2) Did you file a grievance concerning the claims you are raising in this matter? Yes No
		When g -4-12 Grievance Number (if available)
	D.	Have you received a final agency/departmental/institutional answer or determination concerning this matter (i.e., your grievance)? YesNo
	E.	When was the final agency/departmental/institutional answer or determination received by you? <u>Never</u>
		If possible, please attach a copy of your grievance and a copy of the highest level decision concerning your grievance that you have received.
	F.	If there is no prison grievance procedures in this institution, did you complain to prison, jail, or institutional authorities? Yes No
	G.	If your answer is YES:
		1. What steps did you take? <u>Lallowed Suferior Officers</u> to know of incidence
		1. What steps did you take? <u>Lallowed Suferior Officers to Know of incidence</u> 2. What was the result? <u>The officer responsible was reprimarded & evadicated</u>
III.	PAR	TIES
	In I if a	tem A below, place your name, inmate number, and address in the space provided. Do the same for additional plaintiffs, ny.
	Α.	Name of Plaintiff: Lucas Ward Inmate No.: 129506
		Address: 3841 Ireds Ave N. Charleston, Sc 29405.
		In Item B below, place the full name of the defendant, his official position, and place of employment in the space provided. Use Item C for additional defendants, if any.
	В.	Name of Defendant: Al Cannon Position: Sheriff
		Place of Employment: The Charleston County Detention Center
		Additional Defendants (provide the same information for each defendant as listed in Item B above):
		J. Phillips, Subordinate Officer at the Charleston County
		Defention Center; D. Homer, Subordingte Officer at
		the Charleston Country Detention Center.

IV. STATEMENT OF CLAIM

State here, as briefly as possible, the <u>facts</u> of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach an extra sheet if necessary.

16 While being housed in unit (SMU) at the charleston County detention center. At time in the S.A.C. D.C System Custody due to my custody level. Minutes before my recreation time Officer D. I Phillips I reminded to secure all doors because I have tomany unit an they refused I talk those two officers other inmates an they laugh on D. Homer ask group can I" Knowing I'm housed solutely nothing ratching on tolding to suffer from back pain up to an impaired vision.

IV. STATEMENT OF CLAIM - continued.

Civil liability For deliberate indifférence to serious médical needs. Estelle V. Gamble, 429 U.S. 97 104-05, 50 L. Ed. 2d 251, 97s. Ct. 295 (1976)

The medical staff at the charloston county detention center denied me the medical assistance I needed officer whylie" has me on video in housing unit (Bmw) vomiting blood I grieved an complain to the medical Staff an I was perseribe medication for a fid reflex Such as tums, Zantec, priloser, none or which helped what so ever I continued vomiting blood with no further Medical evaluation. The nurse only said Maybe it was something you at a maybe its stomach overs' but did nothing to Findout Why Im vomiting blood.

As far as poor living conditions go theres mold in cells and the showers. I was denied my commisary for 2 weeks and this facility denied me a Shower for 7 days. I was denied phone cult and visits, the proper nutrition as so just a sandwich ever meal for 9 days Indenied clean water to drink. I was left in a cell with no way to see out or call for help when I faint anyomit. Officer: W.R. HEPP 15 the acting officer who denied me a shower for 7 days. Officer: Scruces. A. was the acting officer on shift and sqt. Rayan that signed off on the slip to denied me everything inbelween as far as phone calls, visits an commisary, showers, recreation time for 7 days.

State briefly and ex	sactly what you want the court to do for you.
1 0 0 0 1 V	d like the court to plase File my lawsuit so I e Further steps about my screty and Health and living
condition	E TWO THEY STEPS WOOM MY SETTING WAS THE END THOMY
COMOTTION	
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declare under j	penalty of perjury that the foregoing is true and correct.
gned this Lucc	oward day of Sept. 25,16 Sunday ,20 16
	Lucao Ward

Signature of Plaintiff